



JUSTIFICATION OF STATE VEHICLE ASSIGNMENT

State Form 53846 (1-09)

DEPARTMENT OF
ADMINISTRATION
FLEET SERVICES DIVISION
601 W McCarty Street
Indianapolis, IN 46225
Fax: (317)233-4881

- INSTRUCTIONS:**
1. Complete this form annually for each assigned agency vehicle except for law enforcement vehicles.
 2. Return completed forms to: IDOA Fleet Services, 601 W. McCarty, Indianapolis, IN 46225 or by Fax to (317)233-4881.
 3. Direct all inquiries to Fleet Services at (317)232-1379 or via e-mail to Fleet@idoa.in.gov.

Public Law [P.L. 246-2005], Section 24 of the 2007 Appropriation Act requires agency heads to annually submit justifications for the continued assignment of a state vehicle to any State employee. Each agency head has discretion to decide whether a vehicle may be assigned to a qualifying employee within the provisions of P.L. 246-2005, Section 24 and Chapter 11 of the State Board of Accounts Travel Manual (Page 11:18).

Employee Name: _____

Driver's Lic. #: _____

Expiration Date: _____

Agency/Department: _____

Section/Division: _____

Job Title: _____

Phone: _____

Vehicle location when off duty: _____

Comm. number of assigned vehicle: _____

Vehicle Year: _____

Vehicle Description (Make, Model): _____

Vehicle ID Number (VIN): _____

1) Is the Employee a State elected official? Yes ☐ No ☐ If 'Yes', answer question 1-A below. If 'No', proceed to question 2.

1-A) Do your official duties as a State elected official require you to travel about the state? Yes ☐ No ☐

2) Are you a Department or Commission Head? Yes ☐ No ☐ If 'Yes', answer question 2-A. If 'No', proceed to question 3.

2-A) Do your statutory duties as a Department or Commission Head require you to travel greater than 1,000 miles per month¹ or are you subject to official duty call at all times? Yes ☐ No ☐

¹ Commuting miles may not be included in the 1,000 mile computations.

(Continued on reverse)

- 3) For all other State employees to qualify for permanent assignment of a state owned vehicle, each state employee shall be required to meet at least one of the criteria in Group I **and** at least one of the criteria in Group II below:

Group I - Is the State employee assigned:

- ☐ To a job requiring the employee to use specialized vehicles or vehicles with specially mounted equipment?
- ☐ To a job where normal operation of a vehicle might result in unusual wear and tear, and for which it would be inappropriate for the state to require the employee to use a personal vehicle?
- ☐ To a job which generally requires the use of a vehicle for at least one hour per day or for several short trips daily?
- ☐ To a job requiring frequent trips totaling more than 1,000 miles a month, excluding the distance between an individual's home and his normal work station?
- ☐ To a job requiring an employee to transport, for daily use on the job, bulky equipment, supplies, tools, or reference materials which cannot be easily loaded or unloaded?

Group II - Is the State employee assigned:

- ☐ To a job requiring an employee to be on call on a recurring basis beyond normal duty hours and, when called out, requiring immediate travel from a residence to a location where skills or services are needed, bringing along tools, equipment or supplies necessary to perform the job?
- ☐ To a job involving a continually variable work station, in which travel to a central location to obtain a motor pool vehicle would result in significant amounts of unnecessary travel time and loss of productive hours on the job?
- ☐ To a work station with poor vehicle security where overnight or weekend parking of a state owned vehicle might subject it to vandalism or theft?

Prepared by: _____

Date: _____

Approved by: _____

Date: _____